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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)
SUGAHARA et al.)
Application Number: 10/522,241)
Filed: January 25, 2005)
For: A SPIN TRANSISTOR BASED ON THE SPIN-)
FILTER EFFECT AND A NONVOLATILE MEMORY)
USING SPIN TRANSISTORS)
ATTORNEY DOCKET NO. HIRA.0178)

Honorable Assistant Commissioner
for Patents
Washington, D.C. 20231

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	70	70	50 (Over 20)	x \$50	0
Independent Claims	21	21	18 (Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x ½	
				TOTAL	0.00

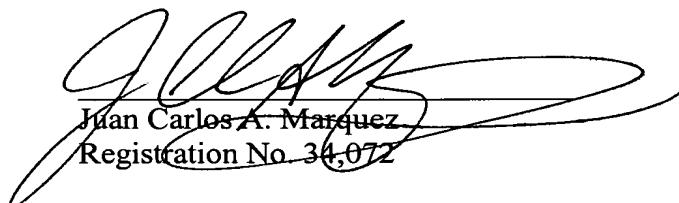
In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- | | |
|---|--|
| <p><input checked="" type="checkbox"/> Preliminary Amendment
(with Claim Amendments)</p> <p><input type="checkbox"/> Substitute Specification</p> <p><input type="checkbox"/> Assignment</p> <p><input type="checkbox"/> Letter to Draftsperson</p> <p><input type="checkbox"/> Terminal Disclaimer</p> | <p><input checked="" type="checkbox"/> Substitute Specification (clean and marked-up version)</p> <p><input type="checkbox"/> Statements & Pre-exam search report with References</p> <p><input type="checkbox"/> Information Disclosure Statement with references</p> |
|---|--|

- Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- A check in the amount of \$ _____ to cover the fee is enclosed.
- The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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